## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

**CLAIMS AS FILED - PART I** 

Application or Docket Number

SED 02-03

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
TC	TAL CLAIMS		(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	
			24				ļ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			24minus 20=		* 4			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =					X42=		OR	X84=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				ı	+140=		OR.	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in o			olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										4	OTHER	THAN
		(Column 1)		(Column 2) (Column 3			_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	ſ	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		Ī	+140=			+280=	
							L	TOTAL		OR	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
	<del></del>	(Column 1)		(Colur		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	ŀ	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000	
								+140= TOTAL		OR	+280= TOTAL	
·								DDIT. FEE		OR	ADDIT. FEE	
_		(Column 1) CLAIMS	<del>,                                    </del>	(Colur		(Column 3)		_				
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	$\Gamma$	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	-	=	$\vdash$	X42=			X84=	<del></del>
Ľ	FIRST PRESE	ULTIPLE DEPENDENT		CLAIM		-	7,72		OR	7,04-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE ADDIT. FEE												
	The "Highest Nur	her Previously Pai	d For" (Total o	r Indonenda	ant) ic tha	highoot number	four	d in the con	ropriato bol	أمم ما ،	1	